SUBMIT: COMPLETS) APPLICATION, TAX **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Address to send permit

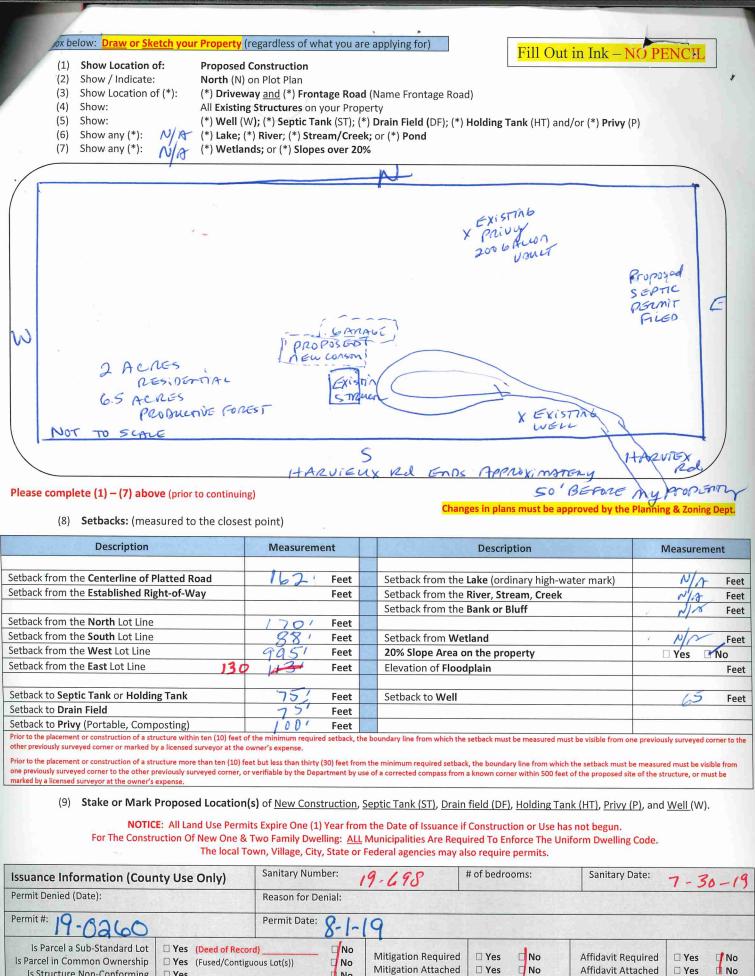
APPLICATION FOR PERMIT



Permit #:	19-0260
Date:	8-1-19
Amount Paid:	\$505.00 Check # 12000
Refund:	\$175 TBA \$330 LU

Copy of Tax Statement

INSTRUCTIONS: No p Checks are made pays O NOT START CONS	able to: Ba	yfield Co	unty Zoning D	epartment.		Co. Zoning De			FILL OUT	IN INK (<mark>NO PE</mark>	ENCIL)			
TYPE OF PERMIT R			LAND		SANITAR		CONDITION	VAI LISE	☐ SPECIAL	USE B.O.	А. П	OTHER		
Owner's Name:	EQUEST		LAND	USL 🛚		ng Address:		ty/State/Zi	Tend I M. BAR A. Y. Colonia March		Telephor			
											657-5			
ELIZABETH A. SWIFT MPLS MN 55406 MPLS 55406 7248 Cell Phone:														
Address of Property:		44	0 1		City/:	State/Zip:	<		54814		SANE			
Address of Property: 86765 Valley Rd Contractor: Contr														
Contractor: Contractor Phone: Plumber:											Plumber	Phone:		
TED (813 0246	Accest Mailing	Address /ir	nclude City/State,	/7in\•	Writton	Authorization		
Authorized Agent: (F	Person Sign	ing Applica	tion on behalf	of Owner(s))	Agen	t Phone:	Agent Manning	Address (II	icidde City/State,	/ ZIP).	Attached			
											☐ Yes			
PROJECT	Logal I	Doccrinti	on: /Use Ta	v Statemen	Tax II							owing Ownership)		
LOCATION Legal Description: (Use Tax Statement)										TAX STATEMENT DEED				
1 1/2	< 1	12	Gov't Lot	Lot(s	CSM	Vol & Page CS	IM Doc# Lo	ot(s) No.	Block(s) No.	Subdivision:				
NWNE	100			1					-	NWNE 1007				
60	_	<	^^	04		BOWS GO	W4, 5	1/2 No	U NE 109	Lot Size	ot Size Acreage			
Section <u>69</u>	, Towr	iship	N, Ra	nge	w	BANGO	12		1 22		a:	D		
				200 (C Di Ct		Distance Co	tructuro i	s from Shorelin	0:				
			Land within ward side of			eam (incl. Intermittent)		tructure i		IS PIU	perty in lain Zone?	Are Wetlands Present?		
☐ Shoreland →	4					nd or Flowage		tructure i	s from Shorelin		Yes	☐ Yes		
	□ IS P	roperty/	Land Within	1000 leet		vescontinue —	L	tructure i		feet	No	No		
					10 7.5	The second secon								
Non-Shoreland														
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of Completion							bedroom	ic l		nat Type of		Type of Water		
* include	No. of	Projec	t	# of S	tories	Foundation	in		The second secon	Sanitary Syste		on		
donated time &							structure	e	Is on t	the property?		property		
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				☐ 1-Sto		☐ Foundation			New) Sanitary		SEPTIC			
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		perty							lone			401		
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Existing Structur Proposed Consti	re: (if pe		ng applied fo	r is relevan	t to it)		y /		Ione	Н	leight: leight:	171		
Proposed Consti	re: (if pe	rmit beir	ng applied fo	r is relevan	t to it)	Length: 2 Length: 44	3	Widt	Ione	H H	leight:	Square		
	re: (if pe		ng applied fo	r is relevan	t to it)	Length: 2	3	Widt	Ione	Н	leight:	Square Footage		
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Issuance Information (County Use Only)	Sanitary Number:	19-698	# of bedrooms:	Sanitary Date: 7 - 30 - 19			
Permit Denied (Date):	Reason for Denial:						
Permit #: 19-0a60	Permit Date: 8-1-	19					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigue) Yes Yes	ious Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Yes No			
Granted by Variance (B.O.A.) ☐ Yes No Case #:	Transact, Granted by Variation (Biolinia)						
Was Proposed Building Site Delineated Yes 🗆 No				Yes			
Inspection Record: owner on-s.k., projection Record: owner on-s.k., projection Record:	t sik marked,	end property :	surreyed.	Zoning District (Abl) Lakes Classification (3-5)			
Date of Inspection: 7-19-19	Inspected by:	1 Norwood		Date of Re-Inspection:			
A uniform Dwelling Code (UDC inspection agency phin to she	had? TVac TN- (If N	de also and a decided	from the local meet and M	ly craffacted UPC maintain setbacks,			
Signature of Inspector: wold Novvood				Date of Approval: 7-29-11			
Hold For Sanitary: Hold For TBA:	Hold For Affid	lavit: 🗆 Ḥ	Hold For Fees:				

own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - 19-69S
SIGN SPECIAL - Class A
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0	260			ssue	d To: El i	izabet	h Swift							
N ½ of S 1 Location:	∕₂ of NW	1/4	of	NE	1/4	Section	9	Township	50	N.	Range	4	W.	Town of	Bayfield
Gov't Lot			L	_ot		Blo	ock	Su	bdivisio	on				CSM#	
						<u>Ad</u> (18	ldition 3' x 8')	Convert to (20' x 43') (8' x 8') = 6 require additio	= 860 672 sc	sq. ft . ft.;	t.; <u>Deck</u> Attached	(20'	x 8') (12' x 8') (2	26' x 8') = 288 sq. ft.]
		e si	tart	of co	nstr	uction. M	lust m	eet and ma	aintai	n set	backs.	ger	ісу т	ust be ol	btained prior to

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

August 1, 2019

Date